DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 02/24/2006

## **Provider Inspection Summary**

For the period 01/01/2003 to 12/31/2005 Community Based Residential Facility CLASS CS (SEMIAMBULATORY) STATE OF WISCONSIN Bureau of Quality Assurance P.O. Box 2969 Madison WI 53701-2969

## **Facility Information**

Facility Name: HIL LIGHTHOUSE (0009804)

Address: 1301 N 24TH ST, MANITOWOC, WI 54220

**License Status: REGULAR** 

Licensed/Certified/Registered 01/01/2002

Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5240

Survey History

Survey ID: 0094279 End Date: 03/14/2005 Type: ABBREVIATED Purpose: SURVEY/SELF REPORT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

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